

Report Period	#
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Name (print)

Office (if applicable)

District (if applicable)

**Transfer Total Amount of All Campaign Contributions to Line 3 of Contributions Summary**

[illegible]

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**CAMPAIGN EXPENSES**

Report Period #

Southern Nevada Central Labor Council-COPE

Name (print)

Office (if applicable)

District (if applicable)

**Expenses in Excess of \$100****Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Gary Reese 400 Stewart Ave. Las Vegas, NV 89101	J-Campaign Contribution	3/13/03	\$500.00

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Name (print)

Office (if applicable)

District (if applicable)

## Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

**\*\* NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**